

PATENT**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application No.: To Be Assigned
Filing Date: To Be Assigned
Applicant: Cory Schaffhausen
Group Art Unit: To Be Assigned
Examiner: To Be Assigned
Title: METHOD AND APPARATUS FOR PERFORMING
MENISCUS REPAIR
Attorney Docket: 5490-000359

Director of the United States Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450

STATEMENT UNDER 37 CFR 3.73(b) AND POWER OF ATTORNEY

Under 37 C.F.R. § 3.73(b), the undersigned hereby states that the below-named Assignee is an assignee in the above-identified Application:

Assignee: Arthrotek, Inc.
56 E. Bell Drive Dr.
P.O. Box 587
Warsaw, IN 46581

The documentary evidence of a chain of title from the original owner to the Assignee is provided in the Assignment Document(s):

☒ filed herewith,
☐ previously filed,
Reel No. , Frame No.

POWER OF ATTORNEY

I hereby appoint David L. Ahlersmeyer of Biomet Inc., Registration No. 31,938, Registration No. 36,713 of Biomet, Inc., Stephen J. Foss, Registration No. 31,251, Richard W. Warner, Registration No. 38,043 and Brian D. Hollis, Registration No. 51,075 of Harness, Dickey & Pierce, P.L.C., my attorney with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.


CORRESPONDENCE ADDRESS

I request the Patent and Trademark Office to direct all correspondence and telephone calls relative to this application to Harness, Dickey & Pierce, P.L.C., P. O. Box 828, Bloomfield Hills, Michigan 48303 (248) 641-1600.

The undersigned (whose title is supplied below) is empowered to sign this certificate on behalf of the assignee.

Date: 2/17/04

RESPECTFULLY SUBMITTED.



Name: David Nolan
Title: President

DECLARATION AND POWER OF ATTORNEY

Atty. Dkt. No.: 5490-000359

DECLARATION

As a below named inventor, I hereby declare that:

My residence, mailing address and citizenship are as stated below next to my name,

I believe that I am the original and first inventor or inventors of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR PERFORMING MENISCUS REPAIR

the specification of which (check one)

- ☒ is attached hereto.
or
☐ was filed on _____ as Application Serial No. or PCT International Application No. _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. §§ 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S)				
APPN. SERIAL NO.	COUNTRY	DATE FILED (MM/DD/YYYY)	PRIORITY CLAIM	
			Yes	No

DECLARATION AND POWER OF ATTORNEY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY

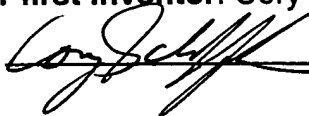
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DECLARATION AND POWER OF ATTORNEY

Full name of sole or first inventor: Cory Schaffhausen

Inventor's signature: 

Date: 2/12/04

Residence: 889 Colorado Ave., Palo Alto, California 94303

Citizenship: US

Mailing Address: Same